SUPPLEMENT

TO THE

BRITISH MEDICAL JOURNAL

LONDON: SATURDAY, JULY 6th, 1935

CONTENTS

PAGE

BRITISH MEDICAL ASSOCIATION

Annual Meeting, Melbourne, September, 1935: Provisional Programme:

Scientific Sections ... 1
Provisional Time-Table ... 4
Excursions and Tours ... 4
Travelling Facilities in Australia ... 5

National Health Insurance:

Insurance Acts Committee Meeting ... 6
Insurance Medical Service Week by Week ... 8

CURRENT NOTES:

Remuneration of Post Office Medical Officers ... 8

PAGE

OPHTHALMIC OUT-PATIENT TREATMENT ... 9
THE MEDICAL AND DENTISTS REGISTERS ... 10
GENERAL MEDICAL COUNCIL MEETING ... 10
NOTICES OF MOTION FOR A.R.M., JULY, 1935 ... 10
CORRESPONDENCE:
Insurance Medical Service: Care of an Aged Patient ... 11
Meeting of Metropolitan Counties Branch (Correction) ... 11
ASSOCIATION NOTICES ... 11
ASSOCIATION INTELLIGENCE AND DIARY ... 11
DIARY OF SOCIETIES AND LECTURES ... 12
VACANCIES ... 12
BIRTHS, MARRIAGES, AND DEATHS ... 12

British Medical Association

ANNUAL MEETING, MELBOURNE, SEPTEMBER, 1935

Patron: His Majesty the King

President: S. Watson Smith, M.D., F.R.C.P.Ed., M.R.C.P., Honorary Physician, Royal Victoria and West Hants Hospital, Bournemouth.

President-Elect: Sir James Barrett, K.B.E., C.B., C.M.G., LL.D., M.D., M.S., F.R.C.S., Deputy Chancellor of Melbourne University; Consulting Surgeon, Victorian Eye and Ear Hospital.

Chairman of Representative Body: H. S. Souttar, C.B.E., D.M., M.Ch., F.R.C.S.

Chairman of Council: E. Kaye Le Fleming, M.A., M.D.

Treasurer: N. Bishop Harman, LL.D., F.R.C.S.

PROVISIONAL PROGRAMME

The British Medical Association will hold its 103rd Annual Meeting in Melbourne, Australia, during the week beginning September 9th, 1935. The clinical and scientific work of the meeting is being arranged in fourteen Sections, which will meet on Wednesday, Thursday, and Friday, September 11th, 12th, and 13th. The names of the Sections and of their officers are given below:

The following Sections will meet on Three Days:

MEDICINE

President: The Right Hon. Lord Horder, K.C.V.O., D.C.L., M.D., F.R.C.P. (London).

Vice-Presidents: J. Crighton Bramwell, M.D., F.R.C.P. (Manchester); A. W. Holmes à Court, M.D., F.R.C.P. (Sydney); Professor C. G. Lambie, *M.C.*, M.D., F.R.C.P.Ed. (Sydney); Sir James Purves-Stewart, K.C.M.G., C.B., M.D., F.R.C.P. (London).

Honorary Secretaries: S. O. Cowen, M.D., 12, Collins Street, Melbourne, C.1; J. G. E. Hayden, M.D., M.R.C.P., 55, Collins Street, Melbourne, C.1; J. C. Matthews, *M.C.*, M.D., F.R.C.P., Hazelacre, Downton, Wilts.

Wednesday, September 11th.—10 a.m., *Discussion:* Obesity. To be opened by Prof. C. G. Lambie (Sydney), Obesity, Aetiology and Metabolism, followed by Sir James Purves-Stewart (London), Obesity from the Endocrine Aspect, and Dr. J. H. Anderson (Ruthin Castle), The Treatment of Obesity. 12 noon, *Paper:* Diabetic Gangrene, by Dr. A. Clarke Begg (Swansea).

Thursday, September 12th.—10 a.m., *Discussion:* The Differential Diagnosis and Treatment of Severe Anaemia. To be opened by Dr. J. C. Matthews (Downton), followed by Dr. J. H. Anderson (Ruthin Castle), The Treatment of Pernicious Anaemia, Dr. A. Clarke Begg (Swansea), Pitfalls in the Diagnosis of Pernicious Anaemia, and Dr. C. T. C. de Crespigny (Adelaide). 12 noon, *Paper:* The Significance of "Gallop" and other Types of Triple Rhythm, by Dr. J. Crighton Bramwell (Manchester).

Friday, September 13th.—(Combined Meeting with Section of Surgery). 10 a.m., *Discussion:* Thyrotoxicosis. To be opened by Lord Horder and Sir Thomas Dunhill (London), followed by Prof. C. E. Hercus (Dunedin, N.Z.), Dr. H. Hume Turnbull (Melbourne), Dr. A. W. Holmes à Court (Sydney), Sir Carrick H. Robertson (Auckland), and Mr. Alan Newton (Melbourne).

SURGERY (INCLUDING UROLOGY)

President: Sir Thomas Dunhill, K.C.V.O., C.M.G., M.D., F.R.A.C.S. (London).

Vice-Presidents: Clifford Morson, O.B.E., F.R.C.S. (London); Sir Henry S. Newland, C.B.E., D.S.O., M.S., F.R.A.C.S. (Adelaide); F. C. Pybus, M.S., F.R.C.S. (Newcastle-on-Tyne); Sir Carrick H. Robertson, M.B., F.R.C.S., F.A.C.S. (Auckland, N.Z.).

Honorary Secretaries: A. E. Coates, M.B., B.S., 3, Linda Crescent, Hawthorn, E.2, Victoria, Australia; H. C. Trumble, *M.C.*, M.D., Ch.B., 19, Collins Street, Melbourne, C.1; Lambert Rogers, F.R.C.S., F.R.A.C.S., F.A.C.S., British Post-Graduate Medical School, Ducane Road, W.12.

Wednesday, September 11th.—Discussions: (*a*) 10 a.m., *Chairman,* Sir THOMAS DUNHILL (London). Hydatid Disease. To be opened by Prof. HAROLD DEW (Sydney), followed by Mr. BASIL KILVINGTON (Melbourne), Dr. KEITH D. FAIRLEY (Melbourne), Professor D. W. CARMALT-JONES (Dunedin, N.Z.), Dr. S. C. FITZPATRICK (Victoria), and Dr. KENNETH S. CROSS (Melbourne). (*b*) 12 noon, *Chairman,* Sir HENRY NEWLAND (Adelaide). Surgery of the Pancreas. To be opened by Mr. HAROLD UPCOTT (Hull), followed by Mr. BALCOMBE QUICK (Melbourne) and Mr. F. C. PYBUS (Newcastle-on-Tyne).

Thursday, September 12th.—Discussions: (*a*) 10 a.m., *Chairman,* Sir CARRICK H. ROBERTSON (Auckland, N.Z.) Prostatectomy. To be opened by Mr. CLIFFORD MORSON (London), followed by Mr. JOHN THOMSON-TAIT (Melbourne), Mr. FRANK MACKY (Auckland, N.Z.), and Mr. G. H. BURNELL (Adelaide). (*b*) 12 noon, *Chairman,* Mr. F. C. PYBUS (Newcastle-on-Tyne). Treatment of Carcinoma of the Colon. To be opened by Mr. H. B. DEVINE (Melbourne), followed by Mr. T. E. VICTOR HURLEY (Melbourne).

Friday, September 13th.—(Combined Meeting with Section of Medicine.) 10 a.m., *Discussion:* Thyrotoxicosis. To be opened by Lord HORDER and Sir THOMAS DUNHILL (London), followed by Prof. C. E. HERCUS (Dunedin, N.Z.), Dr. H. HUME TURNBULL (Melbourne), Dr. A. W. HOLMES À COURT (Sydney), Sir CARRICK H. ROBERTSON (Auckland), and Mr. ALAN NEWTON (Melbourne).

OBSTETRICS AND GYNAECOLOGY

President: JOHN S. FAIRBAIRN, M.B., F.R.C.P., F.R.C.S., P.C.O.G. (London).

Vice-Presidents: Professor R. MARSHALL ALLAN, *M.C.*, M.D., F.R.C.S.Ed., F.R.A.C.S., F.C.O.G., F.A.C.S. (Melbourne); J. BRIGHT BANISTER, M.D., F.R.C.S.Ed., F.R.C.P. (London); NINIAN McI. FALKINER, M.D., F.R.C.P.I., F.C.O.G. (Dublin); Professor J. C. WINDEYER, M.D., Ch.M., F.R.A.C.S., F.C.O.G. (Sydney).

Honorary Secretaries: ROBERT FOWLER, O.B.E., V.D., M.D., F.R.C.S., F.R.A.C.S., 85, Spring Street, Melbourne, C.1; A. ROBERTA DONALDSON, M.B., Ch.B., 88, Collins Street, Melbourne, C.1.

Wednesday, September 11th.—10 a.m., *Chairman,* Dr. JOHN S. FAIRBAIRN (London). *Discussions:* (*a*) The Present Position of Caesarean Section in Obstetric Practice. To be opened by Mr. J. BRIGHT BANISTER (London), followed by Prof. J. B. DAWSON (Dunedin, N.Z.), Dr. W. IVON HAYES (Melbourne), and Dr. H. A. RIDLER (Sydney). (*b*) Placenta Praevia. To be opened by Sir COMYNS BERKELEY (London), followed by Prof. J. C. WINDEYER (Sydney) and Dr. A. M. WILSON (Melbourne).

Thursday, September 12th.—10 a.m., *Chairman,* Prof. J. C. WINDEYER (Sydney). *Discussions:* (*a*) The Prevention and Prognosis of the Late Toxaemias of Pregnancy. To be opened by Dr. JOHN S. FAIRBAIRN (London), followed by Dr. JOHN S. GREEN (Melbourne), and Dr. F. BROWN CRAIG (Sydney). (*b*) The Remote Results of Puerperal Sepsis. To be opened by Sir EWEN MACLEAN (Cardiff), followed by Dr. RUPERT E. MAGAREY (Adelaide) and Dr. RUPERT I. FURBER (Sydney).

Friday, September 13th.—10 a.m., *Chairman,* Prof. R. MARSHALL ALLAN (Melbourne). *Discussions:* (*a*) The Ovarian Cycle and its Relationship to Endocrinology. To be opened by Dr. NINIAN McI. FALKINER (Dublin), followed by Mr. BRUCE T. MAYES (Brisbane), Dr. F. A. MAGUIRE (Sydney), and Dr. R. F. MATTERS (Adelaide). (*b*) Some Aspects of Heart Disease Complicating Pregnancy. To be opened by Dr. H. C. E. DONOVAN (Sydney), followed by Dr. JOHN S. FAIRBAIRN (London) and Sir EWEN MACLEAN (Cardiff).

RADIOLOGY AND RADIOTHERAPEUTICS

President: H. M. MORAN, M.B., F.R.C.S.Ed., F.R.A.C.S. (Sydney).

Vice-Presidents: L. J. CLENDINNEN, M.B., Ch.B. (Melbourne); R. A. GARDNER, M.B., D.M.R.E. (Cairo); Major D. B. McGRIGOR, O.B.E., M.B., D.M.R.E. (Frinton-on-Sea); DONALD I. R. SMITH, M.B., B.S. (Perth, W.A.).

Honorary Secretaries: F. G. STEPHENS, M.B., B.S., 12, Collins Street, Melbourne, C.1; A. J. G. MACKAY, M.B., F.R.C.S.Ed., D.M.R.E., Radiological Clinic, Parliament Place, East Melbourne, C.2; B. W. WINDEYER, M.B., F.R.C.S.Ed., The Middlesex Hospital, W.1.

Wednesday, September 11th.—10 a.m., *Discussions:* (*a*) Radiation Treatment of Carcinoma of the Breast. To be opened by Mr. H. M. MORAN (Sydney), followed by Dr. R. A. GARDNER (Cairo), Dr. R. KAYE SCOTT (Melbourne), and Dr. J. G. VERCO (Adelaide). (*b*) Radiation Treatment of Carcinoma of the Tongue. To be opened by Dr. R. A. GARDNER (Cairo), followed by Mr. H. M. MORAN (Sydney) and Dr. L. J. CLENDINNEN (Melbourne).

Thursday, September 12th.—10 a.m., *Discussions:* (*a*) Radiological Diagnosis in Diseases of the Lung. To be opened by Dr. J. G. EDWARDS (Sydney), followed by Dr. JOHN O'SULLIVAN (Melbourne) and Dr. B. L. W. CLARKE (Brisbane). (*b*) Some Notes of the Diagnosis of Bone Tumours. To be opened by Dr. H. R. SEAR (Sydney), followed by Dr. C. F. MACDONALD (Melbourne), Dr. V. McDOWELL (Brisbane), and Dr. H. F. PRAAGST (Melbourne).

Friday, September 13th.—10 a.m., *Discussions:* (*a*) Radiological Education and the Teaching of Radiology. To be opened by Major D. B. McGRIGOR (Frinton-on-Sea), followed by Dr. K. S. CROSS (Melbourne) and Dr. K. H. HALLAM (Melbourne). (*b*) The Radiological Examination of the Stomach and Duodenum. To be opened by Dr. K. S. CROSS (Melbourne), followed by Dr. JOHN O'SULLIVAN (Melbourne), Dr. H. A. McCOY (Adelaide), and Dr. C. F. A. DE MONCHAUX (Dunedin).

The following Sections will meet on Two Days:

DISEASES OF CHILDREN

President: ROBERT HUTCHISON, LL.D., M.D., F.R.C.P. (London).

Vice-Presidents: F. N. LE MESSURIER, D.S.O., M.B. (Adelaide); E. H. M. STEPHEN, M.B. (Sydney); H. DOUGLAS STEPHENS, M.D., M.S., F.R.A.C.S. (Melbourne); E. H. WILLIAMS, M.B. (Dunedin, N.Z.).

Honorary Secretaries: J. G. WHITAKER, M.D., M.S., F.R.C.S., 55, Collins Street, Melbourne, C.1; IAN J. WOOD, M.D., M.R.C.P., 12, Collins Street, Melbourne, C.1.

Wednesday, September 11th.—10 a.m., *Discussions:* (*a*) Harelip. To be opened by Mr. H. DOUGLAS STEPHENS (Melbourne), followed by Mr. R. B. WADE (Sydney). (*b*) Infant Feeding. To be opened by Dr. H. BOYD GRAHAM (Melbourne), followed by Dr. E. H. WILLIAMS (Dunedin, N.Z.) and Dr. F. N. LE MESSURIER (Adelaide).

Friday, September 13th.—10 a.m., *Discussions:* (*a*) Pink Disease. To be opened by Dr. A. JEFF WOOD and Dr. IAN J. WOOD (Melbourne), followed by Dr. Robert Hutchison (London), Dr. E. H. M. STEPHEN (Sydney), and Dr. S. F. McDONALD (Brisbane). (*b*) Intussusception. To be opened by Dr. P. L. HIPSLEY (Sydney), followed by Mr. W. VICKERS (Sydney) and Mr. H. C. COLVILLE (Melbourne).

NEUROLOGY AND PSYCHOLOGICAL MEDICINE

President: Professor EDWIN BRAMWELL, M.D., P.R.C.P.Ed., (Edinburgh).

Vice-Presidents: A. W. CAMPBELL, M.D. (Sydney); Professor W. S. DAWSON, M.D., F.R.C.P. (Sydney); Professor J. P. LOWSON, M.D. (Brisbane); Professor F. WOOD-JONES, F.R.C.S., F.R.A.C.S. (Melbourne).

Honorary Secretaries: L. B. COX, M.D., M.R.C.P.Ed., 37, Toorak Road, Malvern, S.E.5, Victoria; H. F. MAUDSLEY, *M.C.*, M.D., M.R.C.P., D.P.M., 8, Collins Street, Melbourne, C.1; J. K. SLATER, M.B., F.R.C.P.Ed., 7, Walker Street, Edinburgh.

Wednesday, September 11th.—10 a.m., *Discussion:* Brain Tumour—Diagnosis, Prognosis, and Treatment Fifty Years Ago and To-day. To be opened by Prof. EDWIN BRAMWELL (Edinburgh), followed by Prof. K. H. BOUMAN (Amsterdam), Sir JAMES PURVES-STEWART (London), Dr. A. W. CAMPBELL (Sydney), and Mr. H. M. TRAQUAIR (Edinburgh).

Friday, September 13th.—10 a.m., *Discussion:* Psychoses of Adolescence. To be opened by Prof. W. S. DAWSON (Sydney), followed by Dr. A. W. CAMPBELL (Sydney), Dr. S. EVAN JONES (Leichardt, N.S.W.), Dr. J. K. ADEY (Melbourne), and Dr. C. FARRAN-RIDGE (Melbourne).

OPHTHALMOLOGY

President: A. J. BALLANTYNE, M.D., F.R.F.P.S. (Glasgow).

Vice-Presidents: J. LOCKHART GIBSON, M.D., F.R.A.C.S. (Brisbane); F. G. ANTILL POCKLEY, M.B., M.S. (Sydney); H. M. TRAQUAIR, M.D., F.R.C.S.Ed. (Edinburgh); Lieut.-Colonel R. E. WRIGHT, C.I.E., M.D., I.M.S. (Madras).

Honorary Secretaries: J. RINGLAND ANDERSON, *M.C.*, M.B., B.Ch., 108, Collins Street, Melbourne, C.1; MAX YUILLE, M.B., F.R.C.S.Ed., D.O.M.S., 12, Collins Street, Melbourne, C.1; J. H. DOGGART, M.D., F.R.C.S., 49, Wimpole Street, W.1.

Thursday, September 12th.—10 a.m., *Discussion:* Glaucoma, with Special Reference to Medical Aspects and Early Diagnosis. To be opened by Mr. H. M. TRAQUAIR (Edinburgh). In the afternoon there will be a demonstration on fusion training, by Dr. T. A'B. TRAVERS (Melbourne), with discussion.

Friday, September 13th.—10 a.m., *Discussion:* Cyclitis. To be opened by Mr. J. H. DOGGART (London). Afternoon, Operations.

ORTHOPAEDICS

President: Professor E. W. HEY GROVES, M.D., M.S., F.R.C.S. (Bristol).

Vice-Presidents: L. O. BETTS, O.B.E., M.B., M.Ch. (Adelaide); S. T. IRWIN, M.Ch., F.R.C.S.Ed. (Belfast); S. ALAN S. MALKIN, M.B., F.R.C.S.Ed. (Nottingham) (also acting as home secretary); J. RENFREW WHITE, M.B., F.R.C.S. (Dunedin, N.Z.).

Honorary Secretaries: THOMAS KING, M.D., F.R.C.S., 2, Collins Street, Melbourne, C.1; S. ALAN S. MALKIN, M.B., F.R.C.S.Ed., 54, The Ropewalk, Nottingham.

Thursday, September 12th.—10 a.m., *Discussion:* Fractures of the Neck of the Femur. To be opened by Prof. E. W. HEY GROVES (Bristol), followed by Mr. S. T. IRWIN (Belfast). *Papers:* Osteo-arthritis of Knee and Hip. Mr. J. FORBES MACKENZIE (Melbourne) and Mr. S. A. S. MALKIN (Nottingham).

Friday, September 13th.—10 a.m., *Discussions:* (*a*) Fractures of the Spine. To be opened by Mr. S. T. IRWIN (Belfast), followed by Mr. F. C. PYBUS (Newcastle-on-Tyne). (*b*) The Role of Physiotherapy in Treatment of Injuries in General and Orthopaedic Practice. To be opened by Mr. E. B. M. VANCE (Sydney), followed by Mr. S. A. S. MALKIN (Nottingham).

OTO-RHINO-LARYNGOLOGY

President: FRANCIS MUECKE, C.B.E., M.B., F.R.C.S. (London).

Vice-Presidents: J. STODDART BARR, M.B., Ch.B. (Hobart, Tasmania); L. GRAHAM BROWN, *M.C.*, M.D., F.R.C.S. (London); DOUGLAS GUTHRIE, M.D., F.R.C.S.Ed. (Edinburgh) (also acting as home secretary); J. F. O'MALLEY, M.Ch., F.R.C.S. (London); W. N. ROBERTSON, C.M.G., C.B.E., M.B., M.S., F.R.A.C.S. (Brisbane).

Honorary Secretaries: G. A. D. MACARTHUR, M.D., F.R.A.C.S., 85, Spring Street, Melbourne, C.1; J. H. SHAW, M.B., F.R.C.S.Ed., D.L.O., 55, Collins Street, Melbourne, C.1; DOUGLAS GUTHRIE, M.D., F.R.C.S.Ed., 4, Rothesay Place, Edinburgh.

Wednesday, September 11th.—10 a.m., *Discussion:* The Treatment of Maxillary Sinus Suppuration. To be opened by Mr. J. F. O'MALLEY (London), followed by Dr. J. J. WOODBURN (Sydney), Dr. EDGAR J. BROWN (Adelaide), and Mr. DOUGLAS GUTHRIE (Edinburgh). *Papers:* Nasal Sinusitis in Children, Mr. G. C. SCANTLEBURY (Melbourne); Nasal Neuroses or Allergies, Dr. HUBERT M. JAY (Adelaide).

Thursday, September 12th.—10 a.m., *Discussion:* The Treatment of Chronic Suppurative Otitis Media. To be opened by Mr. L. GRAHAM BROWN (London), followed by Mr. ROBERT GODSALL (Sydney), Dr. H. J. GRAY (Perth, W.A.), Dr. GARRET L. HALLORAN (Sydney) and Dr. J. ACOMB (York). *Papers:* Sphenoidal Sinusitis and the Pituitary Gland, Dr. CLIVE M. EADIE (Melbourne); Light Treatment in Laryngeal Tuberculosis, Mr. T. G. MILLAR (Melbourne).

PATHOLOGY AND BACTERIOLOGY

President: Professor A. M. DRENNAN, M.D., F.R.C.P.Ed. (Edinburgh).

Vice-Presidents: Professor J. B. CLELAND, M.D., Ch.M. (Adelaide); Professor E. F. D'ATH, M.B., Ch.B. (Dunedin); W. KEITH INGLIS, M.D., M.S. (Sydney); W. J. PENFOLD, M.B., C.M. (Melbourne).

Honorary Secretaries: C. H. KELLAWAY, *M.C.*, M.D., M.S., F.R.C.P., Melbourne Hospital, Melbourne; Professor H. A. WOODRUFF, M.R.C.S., L.R.C.P., 48, Fellows Street, Kew, E.4, Victoria.

Wednesday, September 11th.—10 a.m., *Discussions:* (*a*) Calcification. To be opened by Dr. F. S. HANSMAN (Sydney), followed by Prof. P. MACCALLUM (Melbourne), and Dr. EDGAR KING (Melbourne). (*b*) The Pathology of Osseous Tissue. To be opened by Prof. A. M. DRENNAN (Edinburgh), followed by Prof. P. MACCALLUM (Melbourne), Dr. W. KEITH INGLIS (Sydney), Dr. EDGAR KING (Melbourne), and Dr. R. A. WILLIS (Melbourne). *Papers:* Leukaemic Infiltrations, Prof. J. B. CLELAND (Adelaide); Neural Components in Teratomata, Dr. R. A. WILLIS (Melbourne).

Thursday, September 12th.—10 a.m., *Discussions:* (*a*) Anaerobes in Disease. To be opened by Prof. H. A. WOODRUFF (Melbourne), followed by Prof. C. E. HERCUS (Dunedin, N.Z.), Dr. W. J. PENFOLD (Melbourne), Dr. G. M. OXER (Melbourne), and Dr. C. W. ADEY (Melbourne). (*b*) Problems in Virus Disease. To be opened by Dr. F. M. BURNET (Melbourne), followed by Prof. H. K. WARD (Sydney), Dr. LIONEL BULL (Adelaide), and Dr. E. V. KEOGH (Melbourne). *Paper:* Determination of Haemoglobin as Globin Picrate, Dr. A. BOLLIGER (Sydney).

PHARMACOLOGY, THERAPEUTICS, AND ANAESTHESIA

President: Sir WILLIAM WILLCOX, K.C.I.E., C.B., C.M.G., M.D., F.R.C.P. (London).

Vice-Presidents: L. A. IVAN MAXWELL, M.D. (Melbourne); Z. MENNELL, M.B. (London); Professor SYDNEY SMITH, M.D., F.R.C.P.Ed., F.R.S.Ed. (Edinburgh); GILBERT R. TROUP, M.B., M.R.C.P. (Perth, W. Australia).

Honorary Secretaries: GEOFFREY KAYE, M.D., 14, Collins Street, Melbourne, C.1; B. L. STANTON, M.B., M.R.C.P., 95, Broadway, Camberwell, E.6, Victoria; E. LEWIS LILLEY, M.B., F.R.C.S., 86, New Walk, Leicester.

Thursday, September 12th.—Chairman, Sir WILLIAM WILLCOX (during the first discussion Prof. SYDNEY SMITH will preside). 10 a.m., *Discussions:* (*a*) The Use and Abuse of Hypnotic Drugs. To be opened by Sir WILLIAM WILLCOX (London). (*b*) A Critical Survey of Urinary Antiseptics. To be opened by Mr. J. THOMSON-TAIT (Melbourne). (Members of the Section of Surgery are cordially invited to take part in the discussion.) *Demonstration:* On a Vaso-constrictor Principle in the Skin of the Frog *Hyla aurea*, Professor W. A. OSBORNE (Melbourne).

Friday, September 13th.—Chairman, Dr. GILBERT R. TROUP. 10 a.m., *Discussions:* (*a*) Premedication. To be opened by Dr. F. W. GREEN (Melbourne). (*b*) Gas Anaesthesia under Positive Pressure. To be opened by Dr. GEOFFREY KAYE (Melbourne). (*c*) The Position of Spinal Anaesthesia in Australia. To be opened by Mr. LEO DOYLE (Melbourne).

PUBLIC MEDICINE (TUBERCULOSIS, INDUSTRIAL AND TROPICAL HYGIENE) AND INCLUDING THE HISTORY OF THE DEVELOPMENT OF MEDICINE IN AUSTRALIA

President: Sir HENRY GAUVAIN, M.D., M.Ch., F.R.C.S. (Alton).

Vice-Presidents: Sir RAPHAEL CILENTO, M.D. (Brisbane); Professor C. E. HERCUS, D.S.O., M.B., Ch.B. (Dunedin, N.Z.); G. CARMICHAEL LOW, M.D., F.R.C.P. (London); C. M. MURRAY, D.S.O., M.B. (Kenilworth, C.P.).

Honorary Secretaries: H. M. JAMES, M.B., Ch.B., 22, Mayfield Avenue, Malvern, S.E.4, Victoria; F. R. KERR, D.S.O., M.D., D.P.H., 27, Monomeith Avenue, Canterbury, E.7, Victoria; Professor R. H. PARRY, M.D., M.R.C.P., D.P.H., Bristol Health Offices, 40, Prince Street, Bristol.

Wednesday, September 11th.—10 a.m., Presidential Address by Sir HENRY GAUVAIN (Alton, Hants). *Discussions:* (*a*) 10.20 a.m., The Incidence of Pleural Effusion in Artificial Pneumothorax, with Special Reference to Medical Treatment. To be opened by Dr. DAVID B. ROSENTHAL (Gresswell Sanatorium, Victoria), followed by Dr. J. BELL FERGUSON (Melbourne), and Dr. A. J. COLLINS (Sydney). (*b*) 11.40 a.m., The Surgical Treatment of Tuberculous Empyema. To be opened by Mr. M. P. SUSMAN (Sydney), followed by Mr. LEO DOYLE (Melbourne), Mr. George E. FOREMAN (Melbourne), and Dr. ALLAN S. WALKER (Sydney).

Friday, September 13th.—Discussions: (*a*) 10 a.m. (Combined Meeting with Section of Medical Sociology), Racial Pressure Problems in Australia and Neighbourhood. To be opened by Sir RAPHAEL CILENTO (Brisbane), followed by Sir JAMES BARRETT (Melbourne), Dr. D. G. CROLL (Brisbane), and the Rev. JOHN FLYNN (Sydney). (*b*) 11.10 a.m., Tropical Medicine. To be opened by Dr. G. CARMICHAEL LOW (London) and Dr. C. L. PARK (Singapore). (*c*) 12.20 p.m., Weil's Disease. To be opened by Dr. T. J. COTTER (Townsville, Queensland).

The following Sections will meet on One Day:

DERMATOLOGY

President: S. WATSON SMITH, M.D., F.R.C.P.Ed., M.R.C.P. (Bournemouth).

Vice-Presidents: L. P. JOHNSTON, M.B., M.S. (Sydney); HERMAN F. LAWRENCE, M.R.C.P.Ed. (Melbourne); J. E. MCGLASHAN, *M.C.*, M.B., B.S. (Perth, W.A.); W. C. T. UPTON, M.B., Ch.M. (Adelaide).

Honorary Secretaries: R. R. WETTENHALL, M.B., Ch.B., 85, Spring Street, Melbourne; ALICE B. CARLETON, M.B., B.Ch., 45, Banbury Road, Oxford.

Wednesday, September 11th.—10 a.m., *Discussion:* The Incidence of Skin Diseases in Australia. To be opened by Dr. HERMAN F. LAWRENCE (Melbourne), followed by Dr. J. E. MCGLASHAN (Perth, W. Australia) and Dr. W. C. T. UPTON (Adelaide). *Papers:* Staphylococcal Infections of the Skin and their Treatment, Dr. J. IVAN CONNOR (Melbourne). Some Aspects of Mycological Infections and their Treatment, Dr. J. C. BELISARIO (Sydney).

MEDICAL SOCIOLOGY

President: E. KAYE LE FLEMING, M.D. (Wimborne).

Vice-Presidents: D. G. CROLL, C.B.E., M.B. (Brisbane); The Rev. JOHN FLYNN, O.B.E. (Sydney); Professor J. A. GUNN, B.Sc., M.A., Ph.D. (Melbourne); JAMES MCRAE, M.A. (Malvern, Victoria); HENRY ROBINSON, M.D. (London).

Honorary Secretaries: GEORGE SIMPSON, M.B., M.R.C.P., 149, Heidelberg Road, Ivanhoe, N.21, Victoria; L. DOUGAL CALLANDER, M.D., 6A, South Parade, Doncaster.

Thursday, September 12th.—Discussions: (*a*) 10 a.m., Australian Aerial Medical Services. To be opened by Dr. ALLAN VICKERS (Broome, W.A.). (*b*) 11 a.m., Social Aims of Mental Hygiene. To be opened by Prof. HARVEY SUTTON (Sydney).

Friday, September 13th.—(Combined Meeting with Section of Public Medicine.) 10 a.m., *Discussion:* Racial Pressure Problems in Australia and Neighbourhood. To be opened by Sir RAPHAEL CILENTO (Brisbane), followed by Sir JAMES BARRETT (Melbourne), Dr. D. G. CROLL (Brisbane), and the Rev. JOHN FLYNN (Sydney).

The Honorary Local General Secretary of the Meeting is Dr. J. P. MAJOR, Medical Society Hall, Albert Street, East Melbourne, C.2.

Provisional Time-Table

Monday, September 9th

Arrival and disposal of inter-State and over-seas visitors.

9.0 a.m. to 5.0 p.m. — Registration Rooms open, University of Melbourne.

9.0 a.m. to 6.0 p.m. — Ladies' Reception Room, Ladies' Club, open, Oriental Hotel, Collins Street, Melbourne.

Short trips by car, etc., in city and suburbs.

2.0 p.m.—Official Opening of Trade Exhibition and Hobbies Exhibition.

Visit to Flemington Racecourse.

4.0 p.m.—Civic Reception by Lord Mayor to Officials, Official Delegates, and certain Officers of Sections.

Afternoon teas.

5.0 p.m.—Late afternoon parties.

7.0 p.m.—Dinner by Victorian Medical Women's Society to Overseas and Inter-State medical women.

*9.0 p.m.—Reception by State Government at National Gallery.

A number of small dances.

Tuesday, September 10th

9.0 a.m. to 5.0 p.m.
- Registration Rooms open.
- Ladies' Club open.
- Trade Exhibition open.

10.0 a.m.
- Ladies' excursions—visits to National Gallery and Shrine of Remembrance, followed by morning tea.
- Whole-day excursions.
- Tennis tournament on private courts, with tea.
- Pathological Museum open.
- Hobbies Exhibition open.

*11.0 a.m.—Adjourned Annual General Meeting and President's Address, Town Hall, Melbourne.

1.0 p.m.—Luncheon parties.

2.30 p.m.—Half-day excursions.

3.30 p.m.—Afternoon teas.

*4.30 p.m.—Official Religious Service, St. Paul's Cathedral.

5.30 p.m.—Late afternoon parties.

7.30 p.m.—Dinner parties.

*8.30 p.m.—President's Reception, Town Hall, Melbourne.

Wednesday, September 11th

8.45 a.m.—Clinical Address.

9.0 a.m. to 5.0 p.m.
- Registration Rooms open.
- Ladies' Club open.
- Trade Exhibition open.
- Hobbies Exhibition open.

10.0 a.m.
- Junior American Tennis Tournament at Kooyong (all day).
- Whole-day excursions.

10.0 a.m. to 1.0 p.m.
- Scientific Sections.
- Ladies' excursions.
- Visits to places of interest, hospitals, shops, factories, schools, art galleries, etc.

1.0 p.m.
- Irish Medical Schools and Graduates' Association Luncheon.
- Rotary Luncheon.

2.0 p.m.—Excursions and visits to shops, hospitals, etc.

*3.0 p.m.—Conferring of Honorary Degrees at the University of Melbourne, followed by Garden Party.

3.0 p.m.—Bridge party by twelve hostesses at No. 9, Darling Street.

5.30 p.m.—Late afternoon parties.

7.0 p.m.—Dinner parties.

*9.0 p.m.—Reception at Government House by Their Excellencies Lord and Lady Huntingfield.

Thursday, September 12th

8.30 a.m.—National Temperance League Breakfast.

8.45 a.m.—Clinical Address.

9.0 a.m. to 5.0 p.m.
- Registration Rooms open.
- Ladies' Club open.
- Trade Exhibition open.
- Pathological Museum open.
- Hobbies Exhibition open.

9.30 a.m.
- Excursions.
- Junior Golf Tournament (all day).

10.0 a.m. to 1.0 p.m.
- Scientific Sections.
- Ladies' Excursions.
- Excursions with lunch at Mount Eliza and tea at Frankston.

1.0 p.m.—Luncheon parties.

2.0 p.m.
- Excursions.
- Tennis at Kooyong.
- Bridge.

5.30 p.m.—Late afternoon parties.

7.15 p.m.—Annual Dinner.

9.0 p.m.—Ball given by Victorian Branch, Town Hall, Melbourne.

Friday, September 13th

8.30 a.m.—Medical Missionary Breakfast.

8.45 a.m.—Clinical Address.

9.0 a.m. to 5.0 p.m.
- Registration Rooms open.
- Ladies' Club open.
- Trade Exhibition open.
- Pathological Museum open.
- Hobbies Exhibition open.

9.0 a.m.
- Excursions.
- Ladies' excursions: Macedon, with lunch; Healesville, with lunch.
- Golf Competition for Leinster and Childe Cups, Metropolitan Club.
- Golf Competition for the Notts Ladies' Challenge Cup, Peninsula Club, Frankston; lunch and tea.

10.0 a.m. to 1.0 p.m. — Scientific Sections.

1.0 p.m.—Luncheon parties.

2.0 p.m.—Excursions.

*2.30 p.m.—Conferring of Honorary Fellowships by Royal Australasian College of Surgeons.

5.30 p.m.—Late afternoon parties.

7.0 p.m.—Dinner parties.

8.0 p.m.—Popular Lecture by the Right Hon. Lord Horder: "The Doctor as Eugenist."

9.0 p.m.—Army, Navy, and Air Force Medical Services Ball (by invitation).

Saturday, September 14th

9.0 a.m.
- Excursions: half-day, day, and week-end.
- Melbourne Medical Association excursion and picnic lunch.
- Ladies' excursions: Flinders and lunch; Portsea and lunch, tea at Dromana; Acheron Way and lunch.
- Excursion to Korumburra, inspection of Bush Nursing Hospital, lunch and return via Pakenham and tea at Bush Nursing Hospital, or return via Yallourn.

1.0 p.m.—Luncheon parties.

2.0 p.m.—Moonee Valley Races.

2.45 p.m.
- Football at Melbourne Cricket Ground.
- Garden Party at Berwick (Dr. and Mrs. S. V. Sewell's home).
- Tea at Royal Aero Club at Essendon Aerodrome.

5.30 p.m.—Late afternoon parties.

8.0 p.m.—Theatre night.

* Academic dress will be worn at these functions.

EXCURSIONS AND TOURS

For inter-State visitors attending the Annual Meeting special motor trips are being arranged from Brisbane and Sydney, via Princes Highway, including Canberra if desired, both to and from Melbourne. Also from Sydney a special railway tour will be available on Thursday and Friday, September 5th and 6th, via Canberra, Hume Weir, Kiewa Valley, Tawonga Gap, and Mount Buffalo, arriving in Melbourne at noon on Sunday or Monday, according to the day of departure.

From Adelaide similar tours will leave on Wednesday and Thursday, September 4th and 5th, including two

days at the Grampians, and arriving in Melbourne at 9.30 p.m. on Saturday or Sunday, according to the day of departure.

All these tours will be available after the meeting in the reverse way for visitors returning home. Full details will be supplied by the Excursions Officer.

After the meeting seven extended tours by motor have been arranged to various parts of Victoria of two to four days' duration, and a railway week-end tour to Mount Buffalo leaves on Friday, September 13th, at 4 p.m. Also a camping and fishing week-end may be taken at the Metropolitan Board of Works quarters at Wallaby Creek, at the Plenty Ranges Watershed.

At midnight on Sunday, September 15th, a railway Reso Tour of Victoria begins. This will embrace the Western District, visiting station homesteads at Camperdown, the Trufood factory at Terang, whilst at Wanambool a kangaroo drive will take place. Albury and Hume Weir are next visited, and then the "wineries" at Rutherglen. A day at the Chalet, Mount Buffalo, follows, then Bright with its plantations, and Melbourne is reached on Friday evening.

WHOLE-DAY AND HALF-DAY EXCURSIONS

Daily whole- and half-day tours have been arranged.

The following afternoon tours will start at *2 p.m. daily*, with the exception of Warrandyte, which starts at 2.15 p.m., and Frankston, which starts at 1.30 p.m.

1*a*. *City and Southern Suburbs*, 30 miles.—City streets, principal buildings, Museum, galleries, University, St. Kilda Road, Esplanade, Caulfield Race Course, Malvern, Toorak, Goldman's Australian Woods, Exhibition, Alexandra Avenue.

1*b*. *City, Eastern Suburbs and Factories*, 25 miles.—City streets and buildings, Museum, galleries, University, Pelaco shirt factory (largest in Southern Hemisphere), Bryant and May's match factory, Toorak, Kooyong, Hawthorn, Heidelberg, Clifton Hill.

2. *Warrandyte*, 40 miles.—A scenic river view trip towards the source of the river Yarra. Route is via Balwyn, Doncaster, returning via Templestowe.

3*a*. *Panton Hills*, 60 miles.—Route via Heidelberg, Eltham, Kangaroo Grounds, Panton Hills, Hurstbridge, Diamond Creek.

3*b*. *Kinglake*, 80 miles.—Route via Yan Yean, Whittlesea, Plenty Ranges, Kinglake, Kangaroo Grounds, Heidelberg. Wattle, fruit, and orchards are the chief attractions.

4. *Blue Dandenong Ranges*, 70 miles.—Route via Box Hill, Croydon, Mount Dandenong, Olinda, Sassafras, Sherbrooke Forest (visit the glorious grounds of Mr. A. M. Nicholas), Belgrave, Ferntree Gully, Burwood.

5. *Werribee*.—Visit the Metropolitan and Research Farms and Carter's Egg Farm (largest in Southern Hemisphere).

6*a*. *Mornington*, 75 miles.—A very fine coastal route, skirting Port Phillip Bay, return inland along Point Nepean Road.

6*b* *Frankston*, 55 miles.—*Depart 1.30 p.m.* to the Peninsula Golf Club. Time allowed for play, two and a half hours. Car returns to Melbourne at 5 p.m.

7. *Healesville and Badger Creek*, 80 miles.—Tour arranged for visitors to see Kaola bears and platypuses at the Sanctuary.

The following whole-day tours will start at 10 a.m. daily:

8*a*. *Flinders and Arthur's Seat*, 120 miles.—A beautiful drive embracing the main attractions of the Mornington Peninsula. Main points of interest are Frankston, Hastings, Western Port Road, Somers, Flinders, Redhill, Arthur's Seat, from where wonderful panoramic views are obtained, Droma, Mount Martha, Mornington.

8*b*. *Cowes*, 130 miles.—Route via Dandenong, Cranbourne, Tooradin, San Remo, a tour of Phillip Island, Stony Point, Hastings, Frankston, Point Nepean Road.

9*a*. *Mount Macedon and Cross* (not including Hanging Rock), 90 miles.—Mount Macedon is the site of the finest country residences of wealthy city people. The memorial cross at the summit of Mount Macedon is most inspiring.

9*b*. *Mount Blackwood and Trentham Falls*, 135 miles.—Route via Bacchus Marsh and Myrnong, then across the ranges to Mount Blackwood, heavily timbered; mineral springs and gold are attractions. Trentham Falls are delightfully situated and are most interesting. Return is via Woodend and Gisborne.

10*a*. *Marysville and Black Spur*, 130 miles. Route is via Healesville across the Black Spur Range to Marysville. Tall timber in abundance. Madame Melba's cottage and Marcondah Dam are principal attractions. Fern gullies and panoramic views are also a feature of this tour.

10*b*. *Acheron Way, via Warburton*, 145 miles.—Delightful combination round tour, embracing Lilydale, Yarra Valley, Warburton, Cement Creek, incomparable Acheron Way. High mountain ranges, Somer's Park, and Narbethong. Return via Black Spur and Healesville.

11. *Ballarat*, 140 miles.—Interesting country scenery on main highway. Sight-seeing tour of Ballarat, including Eureka Stockade, statuary, very fine gardens, well-planned township, old gold-mining centre.

12. *Seymour*, 125 miles.—Inspect Northwood Park horse and cattle stud (Red Polls), at the special invitation of Mr. A. G. Hunter.

13. *Gembrook*, 100 miles.—A delightful round tour via Berwick, Olinda, Belgrave, Emerald, Gembrook, Gilwell Park, Upper Beaconsfield. Afternoon tea will be arranged at Dr. Sewell's residence at Berwick by special invitation.

TRAVELLING FACILITIES IN AUSTRALIA

The Railways Commissioners in Australia have made many concessions to members of the Association attending the Annual Meeting. The following are those which interest oversea visitors, and which are obtainable on presentation of a certificate stating that the holder is a bona fide member of the British Medical Association attending the Annual Meeting in Melbourne.

1. Single tickets, Sydney–Perth, at two-thirds single fare, for members of the official party, with break of journey en route at the various capital cities in accordance with the itinerary.

2. Single tickets at two-thirds single fare or return tickets at single fare plus one-third for oversea members disembarking at Sydney, Fremantle, or Adelaide.

3. Oversea members' tickets will be made available for three months instead of the usual availability—namely, one month.

4. Single tickets at two-thirds fare to oversea members travelling within the State or for inter-system journeys after the termination of the meeting.

Any member may obtain a similar concession for wife or husband and for children (sons under the age of 16 years, or daughters of any age, who are living with and dependent upon their parents for support) provided they accompany the member and separate certificates are furnished.

CLINICAL ADDRESSES AND DEMONSTRATIONS

Clinical addresses and demonstrations are being arranged in addition to the meetings of the Scientific Sections.

Professor Edwin Bramwell of Edinburgh will give a clinical address on a neurological subject, and Professor E. W. Hey Groves of Bristol will give an orthopaedic one entitled "The Valley of Dry Bones." It is hoped to arrange for other addresses by prominent visitors.

Clinical demonstrations are also to be held at several of the public hospitals, including the Orthopaedic Hospital at Frankston, the programme for which is being drawn up by a subcommittee of which Dr. W. W. S. Johnston is the convener. In addition, the Embley Memorial Lecture will be given by Dr. Z. Mennell of London.

ACADEMIC DRESS

Academic dress will be worn at the Official Religious Service to be held at St. Paul's Cathedral at 4.30 p.m. on Tuesday, September 10th, on the occasion of the Adjourned Annual General Meeting and President's Address on Tuesday morning in the Town Hall, Melbourne, and at the President's Reception on Tuesday evening; also at a Garden Party at the University, and the Reception at Government House on Wednesday, September 11th.

THE ANNUAL DINNER

This will be held in the Mural Hall and grill room at Myer's on Thursday evening, September 12th. The price of the tickets will be £1 1s. (inclusive of wines). The

seating accommodation is limited, and those desirous of attending are requested to make early application to the honorary secretary, Dinners Subcommittee, British Medical Association Office, 12, Collins Street, Melbourne, C.1. Early application for seats at the dinner does not apply to oversea visitors.

GENERAL INFORMATION FOR LADIES

The Ladies Club will be at the Oriental Hotel, Collins Street, and a cordial invitation will be extended to all lady members of the Association, and to ladies accompanying members attending the meeting, to make use of the club.

All ladies will be requested to register their names at the club on arrival, where badges will be issued to them and a copy of the *Handbook for Ladies*.

The club will be open from 9 a.m. to 6 p.m. and will contain a lounge, writing, and card rooms; also a hairdressing saloon will be available. Morning tea, lunch, and afternoon tea will be served as required. Letters, telegrams, messages, etc., may be directed to the club, at which there will also be a general information bureau.

All information regarding the ladies' programme will be obtained at the club, as well as particulars of excursions, golf, tennis, etc.

A Junior Ladies' Committee is arranging a programme of similar entertainments for the younger visitors.

National Health Insurance

INSURANCE ACTS COMMITTEE, 1934-5

REPORT OF JUNE MEETING

A meeting of the Insurance Acts Committee, under the chairmanship of Dr. H. G. DAIN, was held on June 20th. In addition to the usual agenda, a supplementary agenda was issued dealing with the various matters discussed, on instruction of the Committee, by the Chairman and Medical Secretary with representatives of the Ministry a week previously. A report was also made on the progress of the dispute betwen the Workmen's Committee and the medical practitioners in Llanelly and the support afforded by the Association.

RESIDENT INSURED MEMBERS OF STAFFS OF COUNCIL HOSPITALS

Attention was drawn, at the instance of the London Panel Committee, to the action of the London County Council in overcoming an administrative difficulty in connexion with the resident insured members of its hospital staffs. The particular difficulty arose out of the case of a part-time medical officer at an institution who was also engaged in private practice, but the Council anticipated that there might be other cases of the same kind, and therefore it was proposed to authorize a principal medical officer in the Public Health Department to act as nominal insurance practitioner for such staff, it being understood that this official would delegate to any medical officer the duty of acting as practitioner to any members of the staff, and the fees payable by the Insurance Committee would be recoverable by the Council. This would have the advantage, from the Council's point of view, of transferring to the central office the responsibility for ensuring that all the entitled staff were placed on the list, for receiving, keeping, or returning records, and for verifying statements as to numbers.

The idea of setting up what was called a dummy insurance practitioner, however, was not at all to the mind of the Insurance Acts Committee, and it was felt that this was a means of getting round an emphatic regulation, obviously in the interests of the insured person, by an arrangement which in theory conformed to, but in practice infringed, what was clearly laid down. Members of the Committee from other areas than London also mentioned difficulties in connexion with county or municipal hospitals and institutions, and the Committee approved a course suggested by its chairman that a letter should be sent to the Ministry on the general subject, asking that a number of representatives of areas particularly concerned should be given an opportunity of talking over the matter with the Ministry's officials. Dr. Dain, Dr. Cardale, Dr. Day, Dr. Jonas, and the Medical Secretary were requested to serve in this connexion.

The same small deputation was asked to discuss with the Ministry another matter brought forward a second time from London as to an amendment of the appropriate clause in the Allocation Scheme to provide that practitioners should be entitled to have insured persons removed from their lists irrespective of age—that is to say, those over 65 years of age, and, therefore, not in receipt of certificates—in the same way as those below that age. It appeared that in Scotland the reply of the Department of Health on a similar point had been to the effect that the name of an insured person might be removed from a doctor's list provided the practitioner was satisfied that owing to the nature of the patient's disease or disablement examination and treatment at intervals of more than a week was sufficient.

CHEMISTS' HOURS

Serious difficulties in regard to dispensing in London after 8 p.m. had already been represented to the Committee. After a brief discussion it was agreed that as the problem appeared to be more serious in London than elsewhere the London Panel Committee should first approach the London Insurance Committee on the subject.

DIRECT REPRESENTATION ON THE COMMITTEE

The Committee next turned to an internal matter, the method of election of direct representatives on the Committee. A motion was proposed declaring that the present method was inequitable and required revision. The proposer said that the number of members of the various Panel Committees was out of all proportion to the number of constituents they represented. The inequalities leapt to the surface in every group for which direct representatives were returned. He gave specific examples, mentioning that in the West Riding 987 practitioners were represented by forty members of the Panel Committee, who thus had a vote value of 24.7 each. It was agreed to appoint a subcommittee to consider and report on the method of election of direct representatives, and for this purpose the following were chosen: Dr. Dain, Dr. Jonas, Dr. Pooler, Dr. Thwaites, Dr. Welch, Dr. Winstanley, Dr. Gregg, Dr. Fraser, and Dr. Hargreaves.

THE ACTION OF AN APPROVED SOCIETY

Following upon a matter which was reported at a previous meeting, the attention of the Ministry of Health was drawn to the action of an approved society in requesting a member who was in receipt of certificates of incapacity to call at the society's office to interview an official, no notification of the society's action being sent

to the member's doctor. The Ministry had replied that inquiries had shown that the procedure in question was applied only in cases in which incapacity was due to a minor ailment, and the insured person had already been visited by a sickness visitor. The Department did not consider that there were sufficient grounds to warrant representation to the society with a view to the discontinuance of the practice.

In discussion the point was made that although the Ministry had rather emphasized the fact that no damage resulted to the insured patient, it would be as well to bear in mind possible damage to the practitioner's reputation from the patient's point of view, and whether a major or a minor ailment the objection was the same. The most serious feature of the matter was that some lay person in the approved society's office was supposed to be in a better position to judge of the patient's sickness than the practitioner himself. The Chairman suggested that a copy of the Ministry's reply be sent to the Panel Committee which had brought forward the case, and that it should be asked to produce examples of specific hardship suffered by insured persons as a result of such action.

MORTGAGING OF PRACTICES

The question of the evils consequent upon the mortgaging of practices or their "farming" by lay persons was again raised by the Lancashire Panel Committee, which inquired what action, if any, had been taken by the Insurance Acts Committee. The Medical Secretary here reported that there was a proposed amendment to the National Health Insurance and Contributory Pensions Bill now before Parliament, to which he was sure the Committee would take exception, to the effect that assignment of fees in this or any other connexion should be made impossible, though correspondence with members of Parliament had indicated that there was no likelihood of such a provision being incorporated in the present Bill.

The Chairman reminded the members that the Committee had on many occasions considered this matter, and had decided, to the extent of going back on its previously expressed opinion, that the suggested alteration in the regulations would not cure the condition. It was up to the Lancashire Committee to produce something more or less constructive and helpful in the way of solving this problem. It all boiled down to the ordinary rights of the citizen in the matter of his own property or earnings. Restriction in the matter of assignment interfered with the liberty of the subject, and it was necessary to devise very careful measures, so that only the particular abuses should be prevented, without infringement of what was considered legitimate.

THE SCOTTISH SUBCOMMITTEE

The minutes of the Insurance Acts Subcommittee for Scotland were presented by Dr. Thomas Fraser, who was congratulated on his appointment as deputy lieutenant for the county of Aberdeen. The Committee joined the Subcommittee in an expression of regret at the resignation of Dr. F. K. Kerr. Dr. Fraser referred to the Scottish Conference of Local Medical and Panel Committees, which had been arranged for October 23rd, under the chairmanship of Dr. G. W. Miller. In the absence (returning from Melbourne) of the chairman of the Insurance Acts Committee and the Medical Secretary, he invited the attendance of Sir Henry Brackenbury (acting chairman), Dr. Jonas, and Dr. Hill (Deputy Medical Secretary). Several matters in the minutes, which had had preliminary exploration by the Subcommittee, were put aside for discussion at the Conference.

It was reported that the Investigations Committee of the Department of Health had under consideration the next subject for investigation by insurance practitioners. The suggestions were: (1) accidents (excluding industrial accidents); and (2) tonsillitis. The Subcommittee had expressed a preference for the former. It had also been resolved that the question of securing some more elastic system of record keeping should be considered by the Scottish Conference.

A revised memorandum on prescribing had been prepared by a joint committee, which included representatives of the Subcommittee.

Dr. Fraser was nominated as the Scottish member of the Remuneration Subcommittee of the I.A.C., and Dr. J. F. Lambie to fill the vacancy on the Investigations Committee of the Department of Health caused by the resignation of Professor James Young.

SURGERY ACCOMMODATION IN CORPORATION HOUSING SCHEMES

The Leeds Panel Committee reported that it had been asked to assist the Housing Committee of the Leeds Corporation in allocating special houses which are being erected for a limited number of doctors on the new housing estates. It was desired to minimize the inevitable hardships of doctors in slum clearance areas, but the intention of the Corporation to give a monopoly of surgery accommodation to certain doctors to the exclusion of others was deplored, and this also brought in the question of free choice of doctor to insured persons. The Leeds Committee asked for the guidance of the Insurance Acts Committee.

It appeared that the position in Leeds was more acute than elsewhere. Large areas had been cleared and practices interfered with, in one instance to the extent of the removal of four-fifths of a practitioner's patients. The Panel Committee had not regarded it as part of its duty to accede to the request of the Housing Committee, but had asked for details of various kinds, and that a deputation be received on the question of interference with free choice. In one particular colony it was reckoned that there would be about 3,000 houses and about 15,000 people involved. Four houses were being erected specially for doctors and dentists, and the Panel Committee had been asked to recommend the proper individuals. Practitioners who had already taken surgery accommodation on the new estates has done so under the explicit statement of the Corporation that the conditions were only temporary and subject to the tenancies being at the decision of the Housing Committee.

The opinion was expressed that the Panel Committee ought not to shirk its responsibility in suggesting the most suitable practitioners. It should estimate in its area the proper proportion between potential patients and practitioners, and then go to the Corporation and recommend arrangements in accordance therewith. Further, it should be pointed out that if it was desired to retain the services of a good type of practitioner the Housing Committee must arrange to let the houses to practitioners on a lease of at least seven years. Having put the suggestions as to the sort of thing that should be done, the Panel Committee should get out an ideal medical scheme applying to the areas affected, and draft a list of practitioners who had suffered, with an indication as to who should have first claim. An onerous, and possibly an invidious, task, but one which, if it could be accomplished, would be of assistance at once to the working-class community affected and to the profession.

CHARGING OF FEES: INSURED PERSONS IN HOSPITALS

The Chairman reported to the committee a conversation with officers of the Ministry on the question of charging fees to insured persons when patients in hospitals with restricted medical staffs. A letter, which it was agreed should be addressed to the official of the Ministry concerned, stated the position as follows:

"... At that interview it was gathered that an opinion of the legal advisers of the Minister recently taken was opposed to the view hitherto held by the Ministry that treatment of an insured person by an insurance practitioner in a restricted medical staff hospital could not rank as treatment under the National Health Insurance Acts. It was understood, however, that the legal opinion in question did not affect the original opinion of the Minister if the hospital happened to be outside the radius of practice of the insurance practitioner concerned, and that where the hospital was within the practitioner's radius of practice there would be no objection to an arrangement under which the patient made a payment to the hospital and the practitioner accepted payment from the hospital.

The Insurance Acts Committee expressed the view:

1. That the interpretation held by the Ministry for so many years—that an insured person on admission to a hospital with a restricted medical staff was outside the scope of medical benefit—is an eminently sensible interpretation.

2. That the recently put forward legal interpretation offers no real advantage or protection to insured persons, and there is no evidence of abuse or improper charging of fees under the previous interpretation.

3. That the new interpretation will raise and reopen numerous questions affecting medical benefit relating to anaesthetics, drugs, and the treatment of temporary residents and emergencies, that will require to be decided in a way contrary to previous decisions, and may require the return of G.P. 45 in cases in which instructions have been issued by the Ministry that such are not necessary.

The Committee gave instructions that representations be made to the Minister that the disturbance which will be caused by this reversal of interpretation after all these years (notwithstanding the fact that there has been no alteration of the Medical Benefit Regulations) will be so serious and widespread that the Insurance Acts Committee asks that such alterations be now made in the Regulations as will legalize the previous interpretation, and that, if necessary, the Minister be asked to receive a deputation."

On a cognate matter, the case of Dr. Davis of Bangor, it was agreed to point out in a further letter that the only breach of service proved against him was that he had not rendered Form G.P. 45 in time, previous letters from the Ministry to Insurance Committees having shown that these forms were not required to be rendered in such case. In these circumstances the Committee felt it unfortunate, and likely to cause serious distrust among practitioners, that, as a result of this decision, Dr. Davis appeared to have lost a fee to which he was properly entitled.

OTHER BUSINESS

The result of conversations with the officials of the Ministry on various matters was reported by the Chairman. The material part of it will in due course appear in the Annual Report of the Committee. Amendments proposed by the Ministry in the Medical Benefit Consolidated Regulations, 1935, which were in considerable detail, were laid before the Committee.

The points interesting to the profession in the present National Health Insurance and Contributory Pensions Bill were briefly discussed.

The Committee sat for a short time as the National Insurance Defence Trust, and a point was raised as to whether the objects of the Trust could be interpreted as giving the trustees power to help practitioners who cared to stand for election to county councils. The words of the object under which it was thought this might be included were "organizing or taking action to protect the interests of the medical profession." The Chairman (Dr. Dain) said that this point had never yet been considered. While the trust deed was drawn as widely as possible, it must not be thought that the trustees could do anything they liked, and, of course, they had from time to time to meet the Conference. It was urged that in regard to Scotland the question might become one of some importance in the near future in view of the action of the Glasgow Corporation in setting up a whole-time public assistance medical service. No action was taken by the trustees on the point raised.

British Medical Association

CURRENT NOTES

Remuneration of Post Office Medical Officers

In October, 1931, the remuneration of Post Office medical officers was subjected to a temporary deduction of 10s. as part of the measures of Governmental economy. One-half of the deduction was restored on July 1st, 1934. The Postmaster-General has now informed the Medical Secretary that as and from July 1st, 1935, the remaining 5s. "cut" will be restored, and that payments will be made in full.

THE INSURANCE MEDICAL SERVICE WEEK BY WEEK

Surgery Accommodation under Corporation Housing Schemes

The Leeds Local Medical and Panel Committee has been requested to assist the housing committee of the Leeds Corporation in allocating special houses, which are being erected for a limited number of doctors on the new housing estates. The Panel Committee, while recognizing a general desire to minimize the inevitable hardship of doctors in slum clearance areas, feels some concern at the apparent intention of the Corporation to give a monopoly of surgery accommodation on the new estates to certain doctors to the exclusion of others desirous of doing so. What is of value, however, is that, so far as is known, it is the first time that a local authority has approached a local professional body for advice in a matter of this kind, and it is clear, therefore, that every effort must be made to assist the Corporation of Leeds in its problem of dealing with the settlement of medical practitioners on the new housing estates. There could be no more appropriate professional body than the Local Medical and Panel Committee, which is in the best position to advise on the problem, with due regard to the claims of those doctors whose practices have declined owing to the demolition of the slum areas. It is hoped that the Local Medical and Panel Committee will maintain close touch with the Corporation, and the Insurance Acts Committee may be relied upon to give the local committee any necessary backing in the matter.

Road Accidents

A letter to the insurance practitioners of Northumberland from the Local Medical and Panel Committee contains the following:

In connexion with road accidents (motor vehicles)—which have formed a large proportion of the emergency treatment claims—it is presumed that all practitioners are now aware of the provisions of Sections 16 and 17 of the Road Traffic Act, 1934. These provide a fee for emergency treatment, or for examination where no treatment is given, of 12s. 6d., plus mileage where over two miles, upon a claim being made which is payable by the person using the motor vehicle. The expression in the Act relative to such injury is "bodily injury (including fatal injury) to any person," etc. Insured persons are not excepted, and therefore the practitioner's claim for the statutory fee is not excluded by reason of the injured person being an insured person under the N.H.I. Acts. This interpretation has been approved by the Ministry. The view of the Panel Committee is that practitioners who are entitled to claim and who receive the statutory fee should make no emergency treatment claim to the committee. In a few cases the statutory fee may be less than the Panel Committee would have allowed, but in most of them it will equal or exceed the amount claimable under the Distribution Scheme. It may be added that the statutory fee appears to be claimable in cases where the injury is caused to an insured person on the list of the practitioner rendering the service.

Prescriptions Disallowed

A further extract from the letter of the Northumberland Panel Committee which is of general interest is as follows:

In connexion with surcharges for excessive prescribing five appeals have been heard under the provisions of Article 4 of the Amended Regulations of October, 1930. In each of these the appeal was dismissed, but in three of the cases representations in favour of the appellant were forwarded by the committee to the Ministry. Several other appeals were ultimately withdrawn without going to a hearing. It should be borne in mind that the only power of the committee in these cases is to decide whether or not, in its opinion, the substance or article ordered was, or was not, a drug or appliance forming part of medical benefit. In some cases an argument is open, but in very many the appellant has only to look at the schedule in order to see what the decision is bound to be. The committee recognizes that in many of these cases the appellant is quite aware that the order cannot be sustained, but his desire is to point out reasons for urging that the surcharged substance or appliance *ought* to be available. In such cases the better procedure is, instead of entering the appeal, which involves formalities and notices, to send details

of the surcharge and circumstances to the Panel Committee, and request it, if its opinion justifies, to make representations to the Ministry. The committee is always glad to let any practitioner attend a meeting if he desires to explain a case verbally, whether or not a formal appeal has been entered. In several cases the committee has forwarded representations, but, quite apart from any difficulty with the Ministry, it has sometimes been found that the I.A.C. is not prepared to press the request.

With regard to preparations and appliances which do not form part of medical benefit, the following extract from the annual statistics furnished by the London Insurance Committee may be useful for purposes of reference:

(*a*) During the year 1934 a total of 547 prescriptions were disallowed in respect of the following articles, which are not prescribed appliances:

Air cushion	1	Hypodermic needles (not for insulin) ...	11
Arch supports (disallowed after August)	3	Hypodermic syringes (not for insulin) ...	8
Arm slings	4	Inhalers, atomizers, sprays, etc.	26
Bandages (non-scheduled)	16	Litmus paper	6
Catheters, suprapubic	18	Measures	2
Corn pads and adhesive felt	39	Pessaries (not ring) ...	2
Douches, large ...	3	Safety pins	1
Douches, small (eye and nose)	25	Sutures, sterile ...	2
Dressings (non-scheduled)	9	Syringes (various kinds)	34
Elastic hosiery ...	21	Temperature charts ...	2
Elastic plaster dressings (non-scheduled) ...	31	Thermogene or capsicum wool	41
Eye shades	109	Thermometer, clinical	1
Finger or thumb stalls	62	Trusses	8
Funnels	8	Tubes and rods, glass	32
		Tubes, rubber ...	16
		Tweezers	1
		Wrist straps	5

(*b*) During the year 1934 a total of fifty-four prescriptions were disallowed in respect of the following preparations, which do not form part of medical benefit:

Arrowroot	Rennet tablets
Benger's food	Roboleine
Casein powder	Saccharine tablets
Charcoal biscuits	Soda water
Iodized salt	Tragacanth powder
Ovaltine	Virol
Peptonizing powders	Vitalia
Prepared barley	

Practitioner who has Grown too Old for Service

An Insurance Committee has recently decided, after consultation with the Local Medical and Panel Committee, that owing to the advanced age (85 years) and enfeebled condition of an insurance practitioner he was not in a position adequately to discharge his obligations under the Terms of Service, and that a representation accordingly should be made to the Minister of Health, with a request for the Minister's consent to the committee making other arrangements for the medical treatment of his patients.

It is not often that the provision under which this action has to be taken is brought into use, and it is interesting to learn that the practitioner concerned will have brought to his notice unofficially the desirability of resigning before it is necessary to act upon the representation in question. The doctor has been assisted in his practice for some time past by his son, and it seems only fair that, subject to the provisions of the Terms of Service, the son should have an opportunity of taking over as many as possible of the patients of the practice. This point of view met with general sympathetic assent when the resolution was passed formally at the meeting of the Insurance Committee.

CORRIGENDUM

The honorary secretary of the Wallasey Panel Committee writes with reference to the case which came before the Medical Service Subcommittee, and which was reported briefly in the *Supplement* of June 22nd (p. 295), that the letters from the consultant to Dr. X. were not read by the medical members of the committee, and there was no confirmation of Dr. X.'s statement as to their contents. The chairman stood by the statement that the letters were confidential and they were not produced.

OPHTHALMIC OUT-PATIENT TREATMENT

A fundamental principle of hospital administration to-day is that in-patients should contribute in accordance with their means to the cost of their treatment and maintenance. Hospital finance is materially helped thereby, and honorary medical staffs are assured that the services they so ungrudgingly give are not exploited by persons well able to afford treatment elsewhere. This principle however, is not applied as it should be in out-patient departments; it is well known that many of these are crowded with people who could afford to pay something for the services they receive, and who are not, in fact, strictly eligible to be classed as hospital patients. This is particularly the case at eye hospitals and the eye departments of general hospitals, where there has not only been flagrant exploitation of the ophthalmic surgeon's services, but the crowded conditions have made it impossible for the surgeon to devote the time he would wish to genuine hospital cases requiring operative or remedial treatment.

THE N.O.T.B.'S CIRCULAR

The National Ophthalmic Treatment Board has been much concerned at this unsatisfactory state of affairs, and with a view to remedying it has invited the co-operation of hospital authorities in the National Eye Service, which was established by the Board for the purpose of providing examination by an ophthalmic surgeon, and, if necessary, glasses at an inclusive charge, for those unable to afford the usual specialist's fees. Full details of the service are contained in a recent letter from the general secretary of the N.O.T.B. to the Committee of Management of hospitals providing out-patient ophthalmic treatment and situated in a locality in which the Service is already in operation. In this letter it is pointed out that the Service is available to: (1) all compulsorily insured persons, irrespective of income, and all voluntary contributors in receipt of incomes not exceeding £250 a year whether or not entitled to ophthalmic benefit; (2) the dependants of the foregoing; (3) other voluntary contributors under the National Health Insurance Acts who are entitled to ophthalmic benefit; and (4) non-insured persons who are unable to make their own arrangements with ophthalmic medical practitioners and whose total family incomes do not exceed £250 a year. The inclusive charge for an ophthalmic surgeon's examination and the supply of standard glasses ranges from 14s. to 36s. 6d., the price varying according to the lenses prescribed and the type of glasses selected. The medical practitioners conducting the service are appointed by the Board on the nomination of the British Medical Association, the optical work being done by dispensing opticians. The Board suggests that hospital authorities should proceed to eliminate from their out-patient departments all insured persons entitled to ophthalmic benefit from their approved societies, and others who, in the opinion of the almoner, are in a position to pay 14s. to 18s. for ophthalmic service. To facilitate operation of the scheme, the Board is prepared to supply to hospitals specially printed forms for referring suitable patients to the local centre of the National Eye Service, and, in particular, to send a representative fully conversant with the requirements of approved societies, etc., to discuss the scheme with the almoner or such other person as the hospital may suggest.

A WORKING SOLUTION

Here, then, is a service which, without entailing additional work for hospital authorities, will relieve congestion in out-patient departments and will provide honorary ophthalmic surgeons with some protection against an exploitation which has hitherto gone unchecked. It is to be hoped that the committee of management will recognize its value to them, to the medical staffs, and to patients, and, more especially, that the medical staffs, through the hospital medical committee, will take the opportunity thus provided of helping to remedy a situation which from their point of view has become well-nigh intolerable.

MEDICAL AND DENTISTS REGISTERS

We have received from the General Medical Council the following particulars of names of practitioners erased from the *Medical Register* and the *Dentists Register* by direction of the Council during the May session, 1935, and of the name of a practitioner restored to the *Medical Register* by their direction during the session.

Names Erased from the "Medical Register"

Forbes-Leslie, William, M.B., C.M. 1891, U.Aberd.
Sibbald, Samuel Ramsay, M.B., Ch.B. 1900, M.D. 1905, U.Edin.
Storer, Robert Vivian, M.R.C.S.Eng. 1923, L.R.C.P.Lond. 1923.
Vertannes, Paul, L.R.C.P.Edin. 1918, L.R.C.S.Edin. 1918, L.R.F.P.S.Glasg. 1918.

Names Erased from the "Dentists Register"

Holmes, Walter William, Dentist 1921.
Marley, Robert, Dentist 1921.

Name Restored to the "Medical Register"

Wardman-Wilbourne, Ernest, L.R.F.P.S.Glasg. 1909, D.P.H. Camb. 1912, M.B. U.Edin. 1914.

A circular letter dated June 24th, 1935, calls the attention of licensing bodies to the following resolutions of the Council incorporated in Section 11 of Chapter XIV and Section 10 of Chapter XVI of the Standing Orders of the Council, which relate to penal erasure from the *Medical Register* and the *Dentists Register*:

"The Council recommend that no person whose name has been once removed from, and has not been restored to, the *Medical Register* shall, without previous reference to the General Medical Council, be admitted to examination for any new qualification which is registrable in either the *Dentists Register* or the *Medical Register*."

"The Council recommend that no person whose name has been once removed from, and has not been restored to, the *Dentists Register*, shall, without previous reference to the General Medical Council, be admitted to examination for any new qualification which is registrable in either the *Dentists Register* or the *Medical Register*."

GENERAL MEDICAL COUNCIL

EXECUTIVE COMMITTEE

A meeting of the Executive Committee of the General Medical Council was held on May 27th with Sir Norman Walker in the chair.

Power to Establish Medical Schools.—The Chester Royal Infirmary, in applying to the Board of Trade for a licence under the Companies Act, has included in its draft memorandum of association a clause which would enable it to provide, maintain, and manage medical schools and nursing institutes, to afford instruction to medical practitioners, and to educate and train medical students and nurses. The Board of Trade having asked the Council for its observations, the President had replied—and the reply was approved by the Executive Committee—pointing out that in January last, when three other hospitals made similar applications, the Council stated certain objections to provisions for conferring power upon hospitals to establish medical schools. The letter further asked whether the Board of Trade would be prepared to represent to the applicants that the draft memorandum should be so modified as to make it clear that power to establish a medical school was not to be conferred upon the hospital by any licence which the Board might see fit to grant.

The Duty of Midwives.—A rule of the Central Midwives Board at present reads that a midwife must not lay out the dead body of a patient or her child upon whom she had been in attendance as midwife or maternity nurse. In view of difficulties experienced in rural areas through the application of this rule, it is proposed to amend it, making it read as follows: "A midwife shall not lay out a dead body except in the case of a patient upon whom she has been in attendance at the time of death in the capacity of midwife or nurse." The committee, to which the proposed amendment was communicated, was of opinion that it did not appear to fall within the province of the Council.

Scrutiny of Diplomas.—A letter was read from the registrar of the Medical Board of Western Australia asking all registering bodies to provide in their diploma a place for the diplomate's signature, with a view to obtaining additional proof that the person presenting the diploma was the person who owned it. It was agreed to forward a copy of the letter to the licensing bodies.

King Edward VII College, Singapore.—It was reported from the Straits Settlements that the recommendations made by Sir Richard Needham on his visit to the King Edward VII College of Medicine, Singapore, were being considered, and that a report on the steps taken by the college authorities to give effect to them would be made in due course. The Council was invited to appoint a visitor to inspect the college in 1937 or 1938.

Bechuanaland Proclamation.—A Bechuanaland Medical, Dental, and Pharmacy Proclamation has been made to amend the laws in force in the Protectorate. With certain exceptions, no person is to be registered for practice unless in possession of diplomas or certificates which would enable him to practise in the United Kingdom or in the Union of South Africa. There is a provision, however, under which unqualified persons who have been engaged in practice without at the same time being engaged in any other calling may be permitted to continue, and, further, if the Principal Medical Adviser is satisfied that the interests of the public in any particular area necessitate additional medical or other services he may grant leave to any particular person to continue practice under determined conditions.

British Medical Association

NOTICES OF MOTION FOR ANNUAL REPRESENTATIVE MEETING, LONDON, JULY, 1935

RECRUITING CIRCULAR

By BRISTOL: That the Representative Body regrets the tone of the annual letter to non-members, particularly the penultimate paragraph, and recommends the withdrawal of the letter from circulation.

RELATION OF ASSOCIATION TO AGENCY FOR INTRODUCTION OF PATIENTS

By MARYLEBONE: That (with reference to para. 19 of the Annual Report of Council) the Representative Body expresses the opinion that the activities of the British Medical Bureau in advertising in the lay press and in collecting commissions on fees received by medical practitioners are unsuitable for the sanction of the British Medical Association, and therefore urges the Council to use the influence of the Association to remove these features from the practice of the Bureau.

MIDWIFERY IN GENERAL PRACTICE

By KENSINGTON: That (with reference to para. 106 of the Annual Report of Council) in view of the serious diminution of the opportunities for midwifery in general practice, the Council be asked to consider the whole matter and report on it at the earliest opportunity.

EXTENSION OF MEDICAL BENEFIT UNDER NATIONAL HEALTH INSURANCE

By KENSINGTON: That (with reference to para. 114 of the Annual Report of Council) while agreeing with the principle of the provision of expert medical advice and treatment and laboratory service to supplement and render more effective general practitioners' service for insured persons, it is submitted that any such scheme should be initiated and administered in collaboration with the representatives of insurance practitioners.

EXPANSION OF PUBLIC MEDICAL SERVICES

By KENSINGTON: That (with reference to para. 88 of the Annual Report of Council) in order to facilitate the expansion and development of Public Medical Services,

the Council be asked to arrange for a conference of representatives of established Public Medical Services.

VACCINATION AND REVACCINATION

By WEST SUFFOLK: That compulsory vaccination be abolished, but that the power of the Minister of Health to impose compulsory vaccination and revaccination in times of epidemic should be defined.

By WEST SUFFOLK: That a supply of Government lymph be available free to all registered medical practitioners, to whom an agreed fee for vaccination or revaccination should be paid by the appropriate local authority.

Correspondence

INSURANCE MEDICAL SERVICE: CARE OF AN AGED PATIENT

SIR,—With reference to correspondence which has recently appeared in your columns from practitioners concerning a recommendation made by the Medical Service Subcommittee of the London Insurance Committee, I have to inform you that my committee at its meeting on the 5th ultimo passed the following resolution:

"That the committee do offer no observations on Cases Nos. M. 35/12 and M. 35/13 appearing on the agenda paper of the Insurance Committee for May 23rd, 1935, but that with regard to Case No. M. 35/14 it be placed on record that para. 6 on page 112 does not represent the views given to the Medical Service Subcommittee by its medical members."

Case No. M. 35/14, para. 6, page 112, reads as follows:

"Our medical members advise us that a patient 85 years of age and suffering from myocarditis should be seen about once a week, and if, as in this case, the patient's residence is approximately a mile from the surgery of the practitioner, he should not be expected to come to the surgery, and a home visit should be made."

This has led to the strictures in your correspondent's letters, which appear to have been made under a misapprehension and without a full knowledge of the facts. At the meeting of my committee it was explained that any advice tendered upon this occasion by the medical members of the Medical Service Subcommittee applied to the particular case under consideration, which was one of *serious illness* arising in a man of 85 years with myocarditis. Any views expressed by the medical members in the report upon it should not be taken as a principle applying to all aged patients with myocarditis, but only to patients whose condition is similar to that obtaining in this case. The paragraph in the report relating to the advice of the medical members certainly was not drafted as happily as it might have been, and there was therefore some ground for the misapprehension which arose. —I am, etc.,

C. L. BATTESON,
London, W.C.1, July 1st. Medical Secretary.

MEETING OF THE METROPOLITAN COUNTIES BRANCH

A Correction

SIR,—I have been so accustomed, and with such good reason, to regard the reporting for the *Journal* as beyond criticism, that I hesitated before pointing out a mistake in the report in the *Supplement* of June 29th (p. 306) of what I said at the annual meeting of the Metropolitan Counties Branch. I am reported as having said that a doctor had complained that within a ten minutes' journey of him there were a dozen hospitals, any one of which would take "any out-patient *he liked to send*" (italics mine). I am sure I did not say that, nor does it follow logically from the context. The complaint was that many hospitals are all too ready to swell their figures of out-patients by taking anybody *who cares to go*, without being sent by any doctor.

The efforts of the King's Fund to encourage the hospitals to develop their out-patient departments on consultative lines have been welcomed, as I have good reason to know, by many of our hospitals, but there are still many whose motto is "Let them all come." This is bad for the people who really need out-patient service, and it is an imposition on subscribers to the hospital, who have a right to expect that their money will not be wasted on the trivial cases which can be found in large numbers in most out-patient departments. Moreover, it is against public policy to offer charity to people who can afford to pay for the thing offered. As for the teaching hospitals who allow such abuse, it seems to me that they are doing something which the Scriptures tell us is "not done"—that is, "seething the kid in its mother's milk." Is there any wonder that their old students feel resentful?

In my opinion it is no use our relying on the King's Fund, helpful though it has been, or on the executives of hospitals, many of whom are obsessed with the idea of quantity rather than quality. The remedy is in the hands of the honorary staffs. If they will make a stand against this waste of their time, and the poaching on the rightful sphere of the general practitioner, the offending hospitals would soon drop it. It is because I feel this very strongly, and because I know that many general practitioners in London share this feeling, that I welcome the appointment of the Branch Hospital Committee, and hope that it will continue its good work.—I am, etc.,

London, W.1, June 29th. ALFRED COX.

Association Notices

BRANCH AND DIVISION MEETINGS TO BE HELD

DERBYSHIRE BRANCH: CHESTERFIELD DIVISION.—At Chesterfield Royal Hospital, Tuesday, July 16th, 8.15 p.m. Annual general meeting. Election of officers, etc. Consideration of Annual Report of Council and instructions to representatives.

EDINBURGH BRANCH: EDINBURGH AND LEITH DIVISION.—At B.M.A. Scottish House, 7, Drumsheugh Gardens, Edinburgh, Tuesday, July 9th, 8.15 p.m. Consideration of Supplementary Report of Council, etc.

METROPOLITAN COUNTIES BRANCH: CHELSEA DIVISION.—At Princess Beatrice Hospital (Out-patient Department), Finborough Road, S.W., Thursday, July 11th, 9 p.m. Dr. E. A. Hardy will show a cinematograph film entitled "Facial Deformities."

METROPOLITAN COUNTIES BRANCH: CITY DIVISION.—At Metropolitan Hospital, Kingsland Road, E., Friday, July 12th, 4.30 p.m. Mr. R. J. McNeill Love: Surgical cases.

NORTH OF ENGLAND BRANCH.—At Brancepeth Castle Golf Club, Thursday, July 11th, 12.15 p.m. Annual meeting.

NORTH OF ENGLAND BRANCH: NEWCASTLE-ON-TYNE DIVISION.—At 7, Windsor Terrace, Newcastle-on-Tyne, Tuesday, July 9th, 8.30 p.m. Annual meeting. Election of officers, etc. Consideration of alteration of Division rules.

British Medical Association

OFFICES, BRITISH MEDICAL ASSOCIATION HOUSE
TAVISTOCK SQUARE, W.C.1

Departments

SUBSCRIPTIONS AND ADVERTISEMENTS (Financial Secretary and Business Manager Telegrams: Articulate Westcent, London).
MEDICAL SECRETARY (Telegrams: Medisecra Westcent, London).
EDITOR, BRITISH MEDICAL JOURNAL (Telegrams: Aitiology Westcent, London).
Telephone numbers of British Medical Association and British Medical Journal, Euston 2111 (internal exchange, five lines).

SCOTTISH MEDICAL SECRETARY: 7, Drumsheugh Gardens, Edinburgh. (Telegrams: Associate, Edinburgh. Tel.: 24361 Edinburgh.)
IRISH MEDICAL SECRETARY: 18, Kildare Street, Dublin. (Telegrams: Bacillus, Dublin. Tel.: 62550 Dublin.)

Diary of Central Meetings

JULY

8 Mon. Physical Education Committee, Training of Teachers Subcommittee, 2 p.m.
10 Wed. Physical Education Committee, 2 p.m.
22 Mon. **Council**, 9 a.m.
23 Tues. **Council**, upon termination of Annual Representative Meeting.

DIARY OF SOCIETIES AND LECTURES

MEDICAL SOCIETY OF INDIVIDUAL PSYCHOLOGY. — At Florence Restaurant, W., *Thurs.* Annual General Meeting. Preceded by dinner at 7.30 p.m.

NATIONAL HOSPITAL FOR DISEASES OF THE HEART.—At 1, Wimpole Street, W., *Wed.*, 5 p.m. St. Cyres Lecture by Dr. Paul Dudley White of Boston, U.S.A.: Congestion without Myocardial Failure, with Special Reference to the Diagnosis and Treatment of Chronic Constrictive Pericarditis.

SOCIETY FOR THE STUDY OF INEBRIETY.—At 11, Chandos Street, W., *Tues.*, 4 p.m. Dr. William Brown: Psychology in Relation to Alcohol and Drug Addiction. Discussion, to be opened by Dr. S. W. Patterson, on Addiction to Endocrine Gland Extracts.

WEST LONDON MEDICO-CHIRURGICAL SOCIETY.—At West London Hospital, *Fri.*, 5 p.m., Special General Meeting. 5.15 p.m., Annual General Meeting.

POST-GRADUATE COURSES AND LECTURES

FELLOWSHIP OF MEDICINE AND POST-GRADUATE MEDICAL ASSOCIATION, 1, Wimpole Street, W.—*Prince of Wales's General Hospital*, Tottenham, N.: All-day Course in Medicine, Surgery, and the Specialties. *All Saints' Hospital*, Austral Street, S.E.: Course in Urology, afternoons and evenings. *Southend General Hospital*: Sat. and Sun., all day, Course in General Medicine and Surgery. *Panel of Teachers*: Individual clinics in various branches of medicine and surgery are available daily. Courses, clinics, etc., arranged by the Fellowship are open only to members and associates.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—*Thurs.*, 2 p.m., Clinical Lecture, Dr. R. W. B. Ellis, Chronic Chest Disease; 3 p.m., Pathological Demonstration, Dr. D. Nabarro, Clinical Pathology in Paediatric Practice. Out-patient Clinics, mornings, 10 a.m. to 12 noon. Ward Visits, afternoons, 2 p.m. to 3.30 p.m. (except Wed.).

SOUTH-WEST LONDON POST-GRADUATE ASSOCIATION, St. James Hospital, Ouseley Road, S.W.—*Wed.*, 4 p.m., Pathological Demonstration by Dr. W. G. Barnard: Cardiovascular Hypertrophy; Carcinoma of the Lung.

LIVERPOOL UNIVERSITY CLINICAL SCHOOL ANTE-NATAL CLINICS.—Royal Infirmary: *Mon.* and *Thurs.*, 10.30 a.m. Maternity Hospital: *Mon.*, *Tues.*, *Wed.*, *Thurs.*, and *Fri.*, 11.30 a.m.

VACANCIES

All advertisements should be addressed to the Financial Secretary and Business Manager and NOT to the Editor.

AYR: GLENGALL HOSPITAL FOR MENTAL DISEASES.—J.A.M.O. (male). Salary £300 p.a.

BARROW-IN-FURNESS: COUNTY BOROUGH.—M.O.H. and Port M.O. Salary £900 p.a.

BATH CITY COUNCIL.—A.M.O. Salary £600-£25-£700 p.a.

BELFAST: ROYAL MATERNITY HOSPITAL.—R.M.O. Salary £52 p.a.

BIRMINGHAM CITY.—J.A.M.O. (female, unmarried) at Little Bromwich Hospital for Infectious Diseases. Salary £300 p.a.

BOLINGBROKE HOSPITAL, Wandsworth Common, S.W.—H.P. (male). Salary £120 p.a.

CAPETOWN: THE CAPE HOSPITAL BOARD.—Assistant Radiologist. Salary £600-£50-£800 p.a.

CARDIFF: PRINCE OF WALES'S ORTHOPAEDIC HOSPITAL.—(1) Senior H.S. (2) J.H.S. Males, unmarried. Salaries £200 p.a. and £100 p.a. respectively.

CHILDREN'S HOSPITAL, College Crescent, N.W.—Hon. Assistant S.

DARLINGTON MEMORIAL HOSPITAL.—H.P. (male). Salary £150 p.a.

DERBY: DERBYSHIRE HOSPITAL FOR SICK CHILDREN.—R.H.S. (female). Salary £130 p.a.

DONCASTER ROYAL INFIRMARY.—(1) H.S. (2) Casualty H.S. (3) H.S. to the Eye, and Ear, Nose, and Throat Departments. Males. Salaries £175 p.a. each.

DUBLIN: MATER MISERICORDIAE HOSPITAL.—Assistant in the Radiological Department.

EDINBURGH: GENERAL BOARD OF CONTROL.—(1) Deputy Commissioner (male). (2) Deputy Commissioner (female, unmarried). Salaries £738-£953 p.a. each.

EXETER: ROYAL DEVON AND EXETER HOSPITAL.—H.S. (male). Salary £150 p.a.

GLOUCESTER: GLOUCESTERSHIRE ROYAL INFIRMARY AND EYE INSTITUTION.—(1) Two H.S. (2) H.P. Salaries £150 p.a. each.

GRIMSBY COUNTY BOROUGH.—Assistant M.O.H. and Assistant School M.O. (female). Salary £500-£25-£700 p.a.

GRIMSBY AND DISTRICT HOSPITAL.—(1) Senior H.S. (2) J.H.S. Males. Salaries £200 p.a., and £150 p.a., respectively.

HALIFAX COUNTY BOROUGH.—Whole-time Assistant Maternity and Child Welfare M.O. (female). Salary £500-£25-£700 p.a.

HAMPSTEAD GENERAL AND NORTH-WEST LONDON HOSPITAL, Haverstock Hill, N.W.—(1) Casualty S.O. (female, unmarried) at the Out-patient Department. (2) H.P. (male, unmarried). Salaries £100 p.a. each.

HARROGATE ROYAL BATH HOSPITAL.—R.M.O. (male). Salary £156 p.a.

HEMEL HEMPSTEAD: WEST HERTS HOSPITAL.—J.R.M.O. (male). Salary £120 p.a.

HEREFORDSHIRE GENERAL HOSPITAL.—R.M.O. Salary £150 p.a.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—Medical Registrar. Salary £300 p.a.

HUDDERSFIELD ROYAL INFIRMARY.—H.S. (male). Salary £150 p.a.

HULL ROYAL INFIRMARY.—(1) H.S. to the Ophthalmic, and Ear, Nose, and Throat Departments. (2) Second H.P. (3) Third H.S. Salaries £150 p.a. each. (4) H.P. (male) to the Sutton Branch Hospital. Salary £160 p.a.

ILFORD: KING GEORGE HOSPITAL.—Assistant S.

IPSWICH: EAST SUFFOLK AND IPSWICH HOSPITAL.—(1) H.P. (2) H.S. Salaries £120 p.a. each.

IPSWICH MENTAL HOSPITAL.—H.P. (male). Salary £150 p.a.

KENT AND CANTERBURY HOSPITAL.—Two H.S. (males, unmarried). Salaries £125 p.a. each.

LANCASTER: ROYAL LANCASTER INFIRMARY.—J.H.S. (male, unmarried). Salary £130 p.a.

LEICESTER CITY.—Senior M.O. (male). Salary £900 p.a.

LIVERPOOL HAHNEMANN HOSPITAL.—R.M.O. Salary £120 p.a.

LONDON COUNTY COUNCIL.—(1) A.M.O. (Grade II) at Paddington Hospital. Salary £250 p.a. (2) H.P.'s (males) at (*a*) Hackney Hospital, (*b*) St. Andrew's Hospital, Bow, E., and (*c*) St. Luke's Hospital, Chelsea, S.W. Unmarried. Salaries £120 p.a. each.

LONDON HOMOEOPATHIC HOSPITAL, Bloomsbury, W.C.—P. for Diseases of the Nervous System.

LOWESTOFT AND NORTH SUFFOLK HOSPITAL.—J.H.S. (male). Salary £120 p.a.

MANCHESTER: ANCOATS HOSPITAL.—H.S. Salary £100 p.a.

MANCHESTER CITY.—J.M.O. (male, unmarried, Grade II) at the Monsall Hospital. Salary £250 p.a.

MANCHESTER ROYAL INFIRMARY.—(1) Resident Surgical Registrar and (2) M.O. to the Out-patient Department. Salaries £150 p.a. and £105 p.a., respectively.

MIDDLESEX COUNTY COUNCIL.—(1) S. (Grade II) and (2) A.M.O. at North Middlesex County Hospital. Salaries £500-£50-£750 p.a. and £350 p.a. respectively. (3) J.A.M.O.'s at (*a*) North Middlesex County Hospital, (*b*) West Middlesex County Hospital, and (*c*) Redhill County Hospital. Salaries £250 p.a. each.

MIDDLESBROUGH: NORTH ORMESBY HOSPITAL.—(1) H.S. (2) H.P. Males, unmarried. Salary £135 p.a. and £120 p.a., respectively.

MIDDLESBROUGH: NORTH RIDING INFIRMARY.—(1) C.O. (2) Third H.S. Males, unmarried. Salaries £150 p.a. and £125 p.a., respectively.

MITCHAM: WILSON HOSPITAL.—R.M.O. Salary £120 p.a.

NEWCASTLE-UPON-TYNE CITY AND COUNTY.—(1) Two H.S. and (2) H.P. (males) at Newcastle General Hospital. Salaries £150 p.a. each.

NEWCASTLE-UPON-TYNE: HOSPITAL FOR SICK CHILDREN.—(1) H.P. (2) H.S. Salaries £100 p.a. each.

NOTTINGHAM CHILDREN'S HOSPITAL. R.H.S. (female). Salary £150 p.a.

NOTTINGHAM: GENERAL HOSPITAL.—H.S. (male) for the Fracture and Orthopaedic Departments. Salary £300 p.a.

NUNEATON GENERAL HOSPITAL.—H.S. Salary £150 p.a.

PRINCESS LOUISE KENSINGTON HOSPITAL FOR CHILDREN, St. Quintin Avenue, W.—Hon. Assistant P.

RADIUM BEAM THERAPY RESEARCH, Radium Institute, Riding House Street, W.—Non-resident A.M.O. Salary £250 p.a.

READING: ROYAL BEKSHIRE HOSPITAL.—Surgical Registrar.

ROYAL EYE HOSPITAL, Southwark, S.E.—Hon. Assistant S.

ROYAL NATIONAL ORTHOPAEDIC HOSPITAL, Great Portland Street, W.—Two H.S. (males, unmarried) at Brockley Hill Branch. Salaries £150 p.a. each.

ROYAL NAVAL MEDICAL SERVICE, S.W.—Nine M.O.'s.

ROYAL NORTHERN HOSPITAL, Holloway, N.—H.P. Salary £70 p.a.

RYDE: ROYAL ISLE OF WIGHT COUNTY HOSPITAL.—R.H.S. (unmarried). Salary £180 p.a.

ST. HELENS COUNTY BOROUGH.—Assistant M.O.H. (male). Salary £500-£25-£700 p.a.

SALFORD ROYAL HOSPITAL.—Non-resident Orthopaedic Registrar (male). Salary £100 p.a.

SEAMEN'S HOSPITAL SOCIETY, Greenwich, S.E.—S. at the Hospital for Tropical Diseases, Gordon Street, W.C.

SHEFFIELD CITY.—R.H.S. at King Edward VII Hospital. Salary £150 p.a.

SHEFFIELD ROYAL INFIRMARY.—(1) Ophthalmic H.S. (2) H.S. (3) H.P. Salaries £120 p.a., £80 p.a., and £80 p.a., respectively.

SOUTHAMPTON CHILDREN'S HOSPITAL AND DISPENSARY FOR WOMEN.—R.M.O. (female). Salary £150 p.a.

STAFFORDSHIRE COUNTY COUNCIL.—H.S. (female) at Standon Hall Orthopaedic Hospital. Salary £200 p.a.

STOCKTON-ON-TEES: STOCKTON AND THORNABY HOSPITAL.—J.R.M.O. (male, unmarried). Salary £175 p.a.

SUNDERLAND COUNTY BOROUGH.—A.M.O (male, unmarried) at the Municipal Hospital. Salary £200 p.a.

SWANSEA GENERAL AND EYE HOSPITAL.—H.S. (male, unmarried). Salary £150 p.a.

VICTORIA HOSPITAL FOR CHILDREN, Tite Street, S.W.—(1) H.P. (2) H.S. Salaries £100 p.a. each.

WARRINGTON: COUNTY MENTAL HOSPITAL.—A.M.O. Salary £500-£25-£600 p.a.

WEST END HOSPITAL FOR NERVOUS DISEASES, Gloucester Gate, N.W.—R.H.P. Salary £125 p.a.

WEST END HOSPITAL FOR NERVOUS DISEASES, Welbeck Street, W.1.—Two Hon. Medical Psychologists for the Hospitals Child Guidance Unit.

WESTMINSTER HOSPITAL, Broad Sanctuary, S.W.—"Wander" Scholarship in Diseases of Children. Salary £250 p.a.

WILLESDEN GENERAL HOSPITAL, Harlesden Road, N.W.—Hon. S.

WOLVERHAMPTON: ROYAL HOSPITAL.—H.S. (unmarried) for Fracture and Orthopaedic Department. Salary £100 p.a.

WOODSIDE HOSPITAL, Muswell Hill, N.—R.H.P. Salary £100 p.a.

WOOLWICH AND DISTRICT WAR MEMORIAL HOSPITAL, Shooters Hill, S.E.—R.M.O. (male). Salary £175 p.a.

CERTIFYING FACTORY SURGEON.—The appointment at Newport, Isle of Wight, is vacant. Applications to the Chief Inspector of Factories, Home Office, Whitehall, S.W.1, by July 16th.

BIRTHS, MARRIAGES, AND DEATHS

DEATHS

GELLATLY.—On June 30th, at the Evelyn Nursing Home, Cambridge, Jessie Handyside Gellatly, M.D., D.P.H.Ed., aged 52.

LITTLE.—Major Joseph Pearson (John) Little, Royal Army Medical Corps, son of the late Dr. James Little of Maryport, Cumberland, and beloved husband of Cleo Little, aged 48, at sea on June 9th.

SUCKLING.—On June 30th, at "Beech Lawn," Edgbaston, Birmingham, Cornelius William Suckling, M.D.Lond., aged 80 years. Interred at Sutton Coldfield Cemetery, July 3rd.

Printed and published by the British Medical Association, at their Office, Tavistock Square, in the Parish of St. Pancras, in the County of London.